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PTO/SB/01 (12-97)
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	22727/04125
	First Named Inventor	Chengji Cui et al.
	COMPLETE IF KNOWN	
	Application Number	Not yet assigned
	Filing Date	Herewith
	Group Art Unit	Not yet assigned
	Examiner Name	Not yet assigned

As below named inventors, we hereby declare that:

Our residence, post office address, and citizenship are as stated below next to our name.

We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ANTIGEN-POLYMER COMPOSITIONS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number of PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

We hereby state that we have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

We acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

We hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

We hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/394,967	07/10/02	

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DECLARATION — Utility or Design Patent Application

We hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent

and Trademark Office connected therewith: ☐ Customer Number OR



Place Customer
Number Bar Code
Label here

☒ Registered practitioner(s) name/registration number listed below.

Name	Registration Number	Name	Registration Number
S. Paige Christopher	39,503	James Balazs	47,401
Kristin J. Frost	50,627	Pamela A. Docherty	40,591

☒ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below
or Bar Code Label

Name	Kristin J. Frost				
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Address	800 Superior Avenue – Suite 1400				
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Country	U.S.A.	Telephone	(216) 622-8895	Fax	(216) 241-0816

We hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])			Family Name or Surname		
Chengji			Cui		
Inventor's Signature					Date
Residence: City	Ann Arbor	State	MI	Country	USA
Post Office Address	1129 McIntyre Drive				
Post Office Address					
City	Ann Arbor	State	MI	ZIP	48105
Country	USA				

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Steven P.				Schwendeman			
Inventor's Signature				Date			
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City	Ann Arbor	State	MI	ZIP	48108	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Vernon				Stevens			
Inventor's Signature				Date			
Residence: City	Dublin	State	OH	Country	USA	Citizenship	USA
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Post Office Address							
City	Dublin	State	OH	ZIP	43017	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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DECLARATION		REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)	
Name	Registration Number	Name	Registration Number
Mary E. Golrick	34,829	Leonard L. Lewis	31,176
George R. Hoskins	46,780	Charles B. Lyon	25,739
Brian D. Johnson	38,520	John E. Miller	26,206
Jeanne E. Longmuir	25,519	Nenad Pejic	37,415
Sean T. Moorhead	38,564	June E. Rickey	40,144
John T. Wiedemann	28,920	William E. Zitelli	28,551
Tara A. Kastelic	35,980	Douglas B. McKnight	50,447
		Kristin J. Frost	50,627

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